
Expenditures & Utilization Tracking Update
Joint LOC on MH/DD/SAS
November 9, 2010

Division of Medical Assistance
Kelly Crosbie, LCSW
Behavioral Health Manager

SFY 2010

DMA Utilization & Expenditures Tracking

- Per LOC request: update on utilization/expenditures that exceed 5% (increase or decrease)
- Comparison of SFY10 Q4 to SFY11 YTD
- Request that report be given quarterly
 - Uneven monthly reports based on paid claims

Children's Services

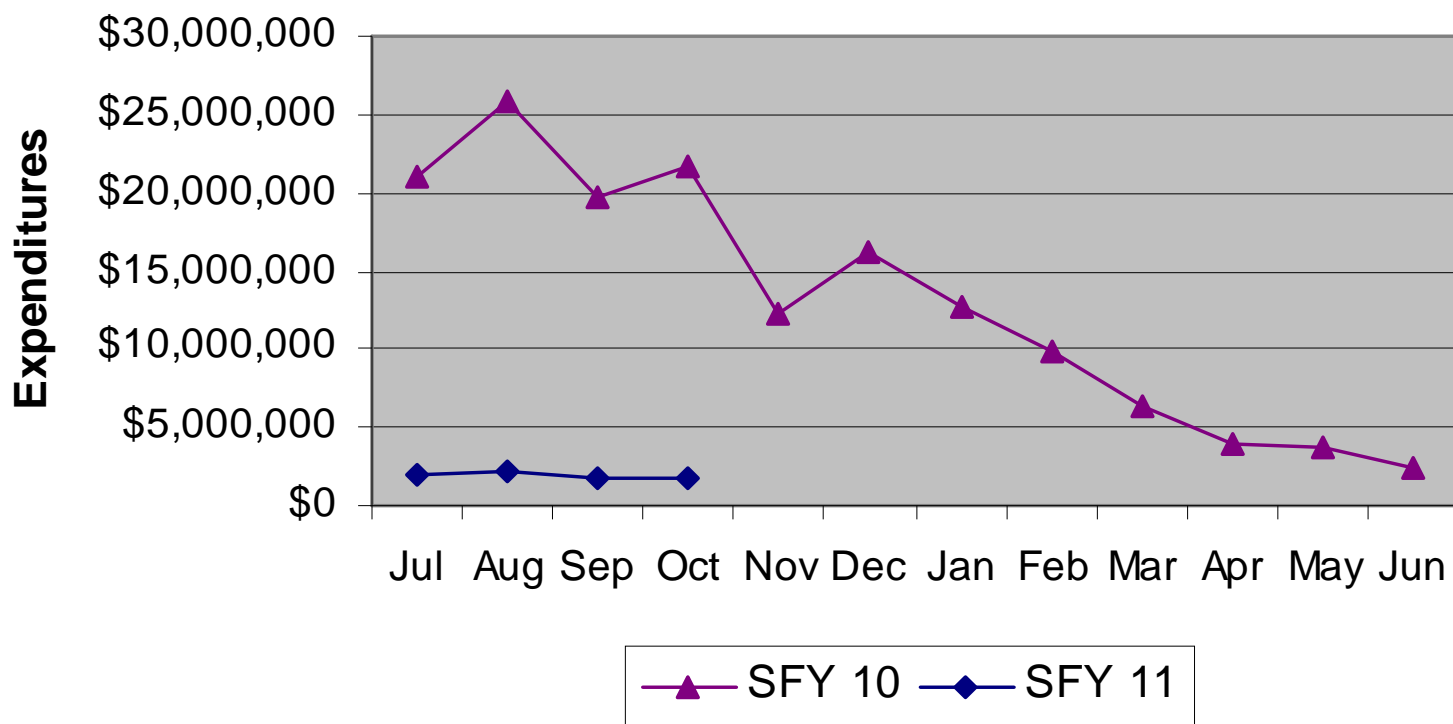
Community Support

Intensive In-Home

Multisystemic Therapy (MST)

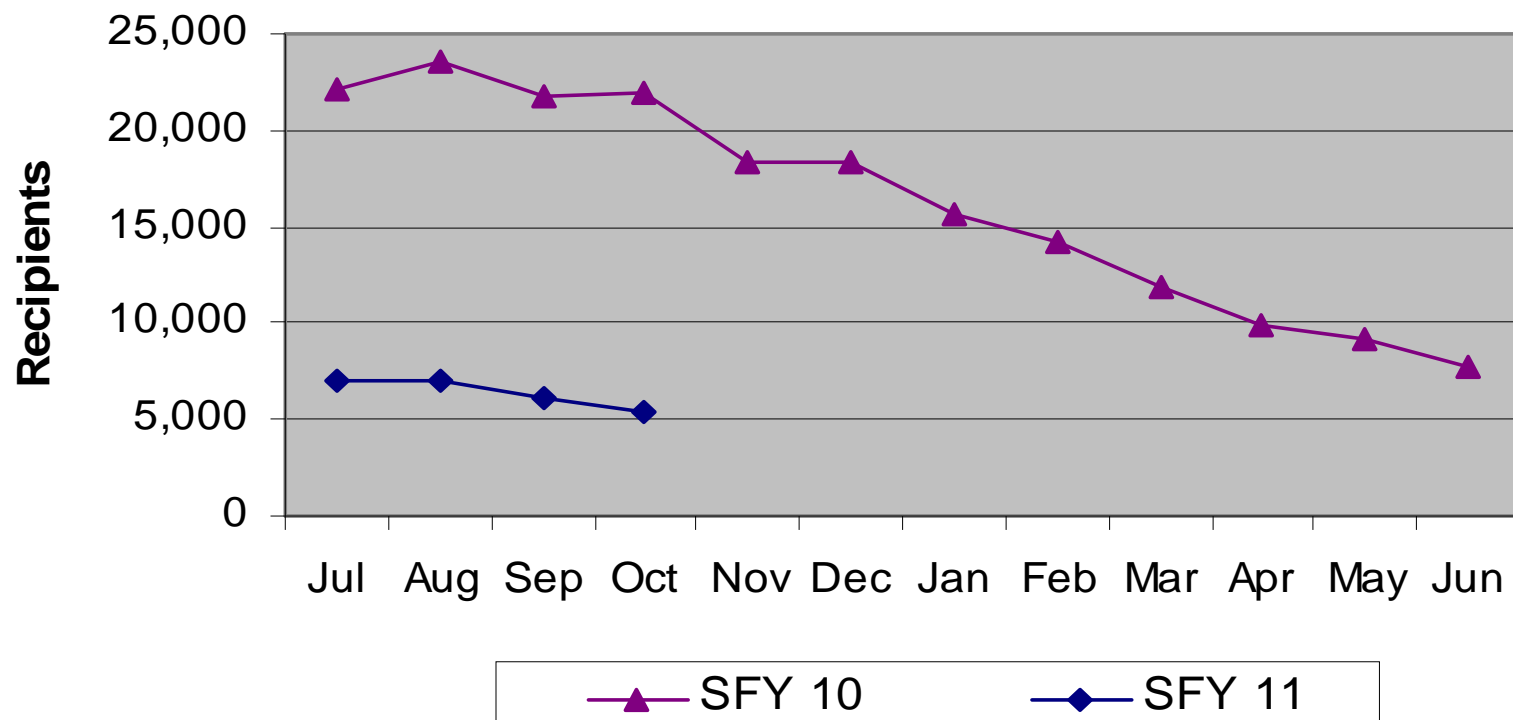
Community Support-Child Expenditures

Community Support - Individual Child Expenditures



Community Support-Child Recipients

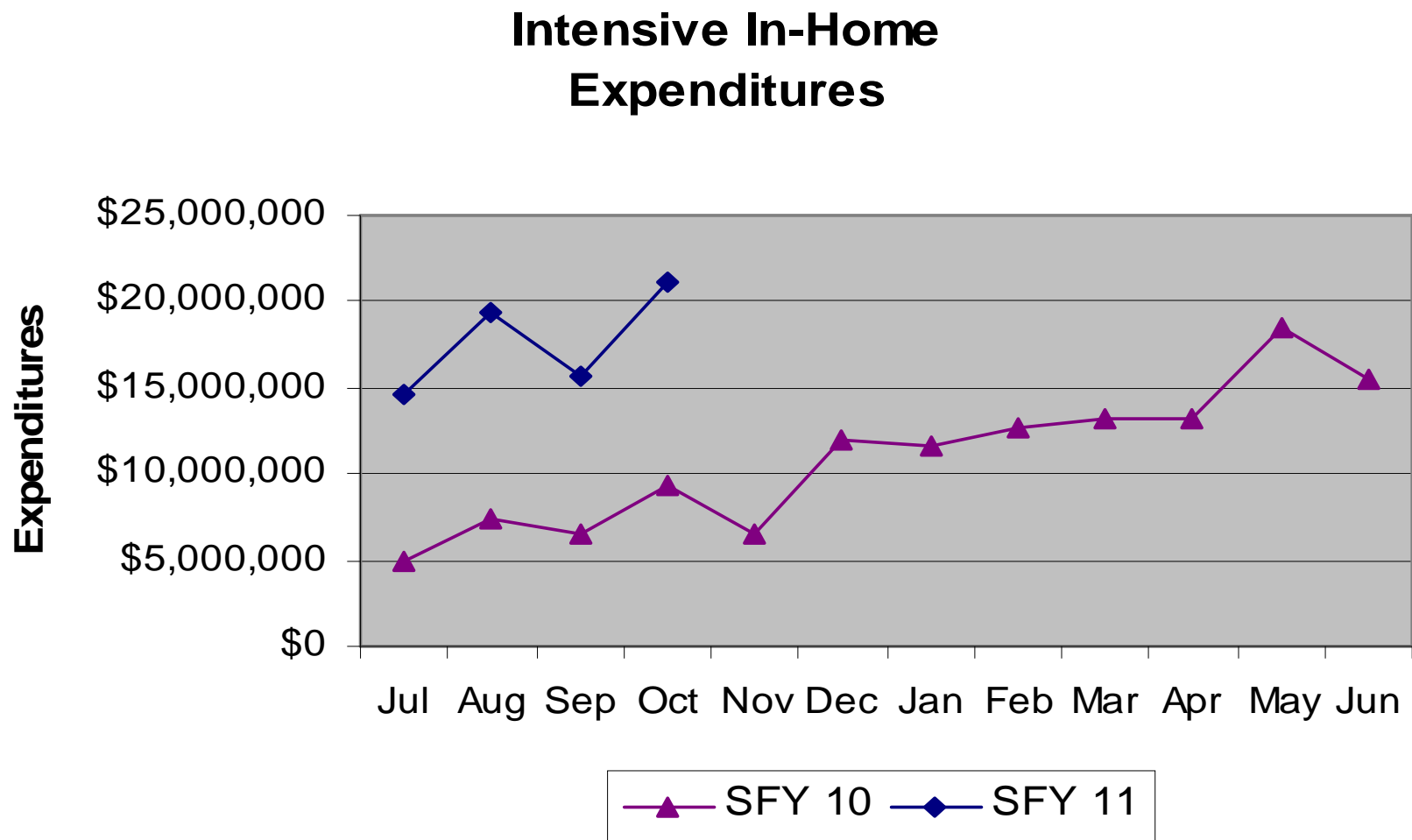
Community Support - Individual Child Recipients



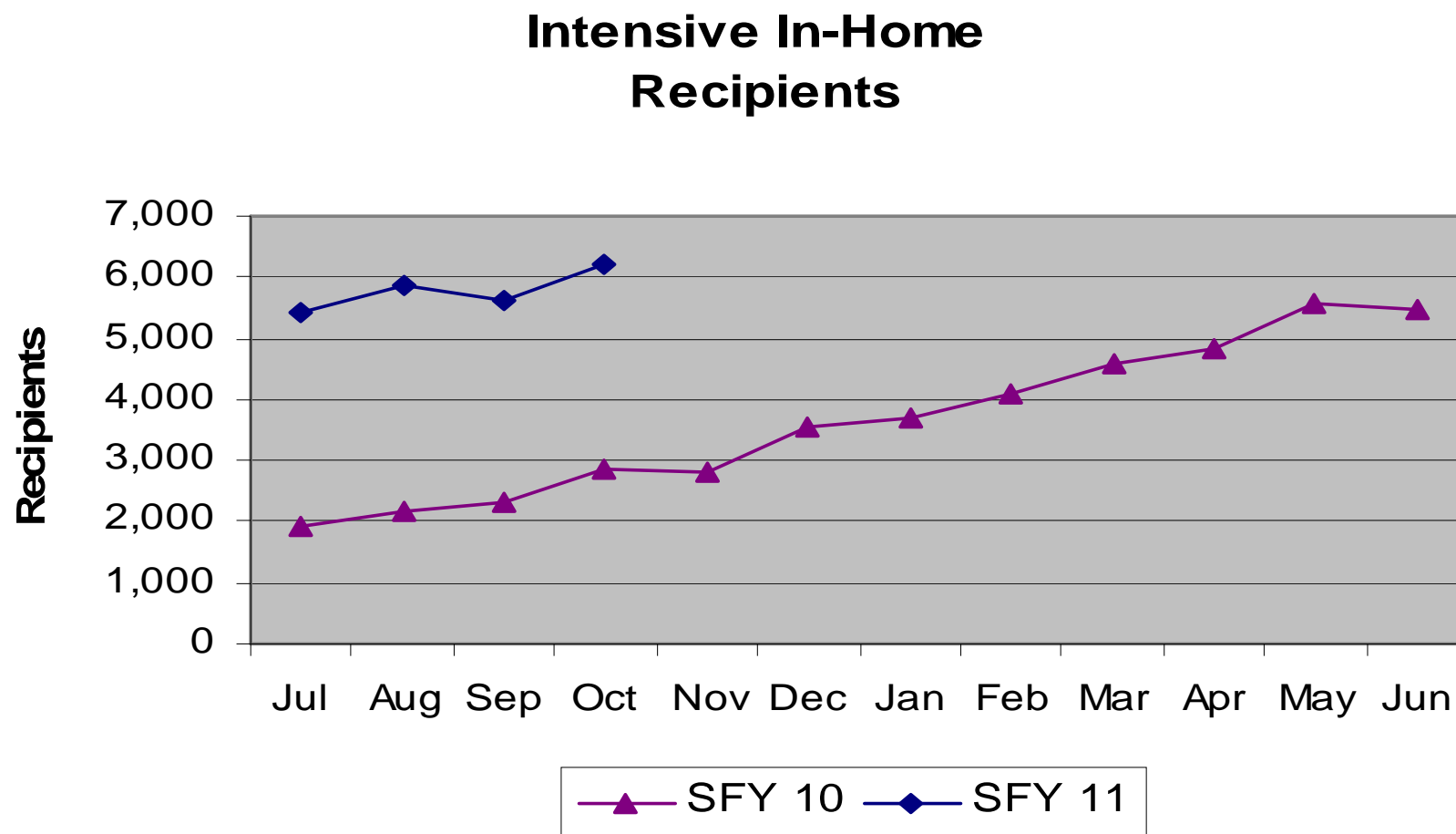
Community Support-Child

- Expenditures are down 43%
 - = \$1.4 million/month (less)
- ~2500 fewer children per month
- ~ 6400 children still receive this service
- Service ends December 31, 2010

Intensive In-Home Expenditures



Intensive In-Home Recipients

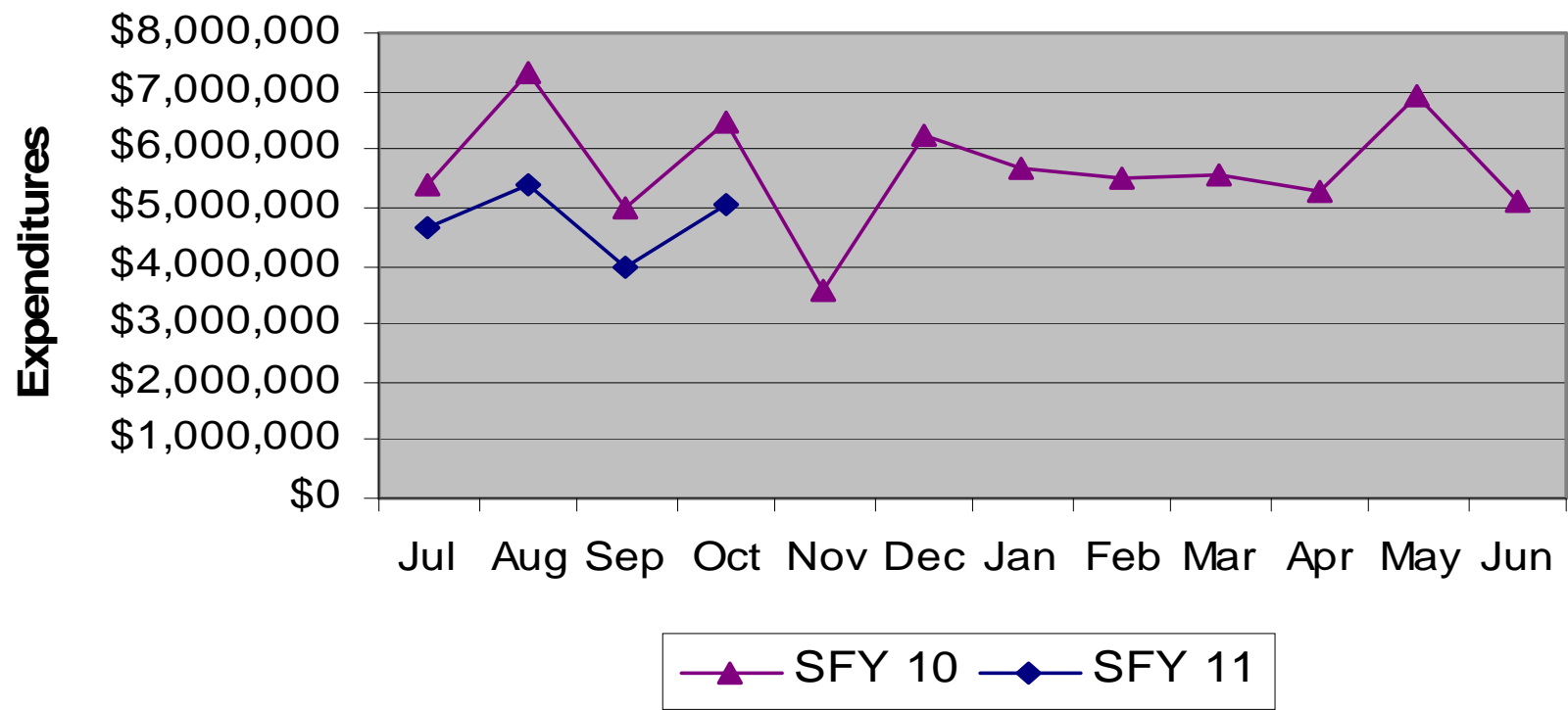


Intensive In-Home

- Expenditures are up 12.7%
 - = \$2 million/month (more)
- Increase of ~700 children per month
- Clinically appropriate transfers from CS and Level III, IV

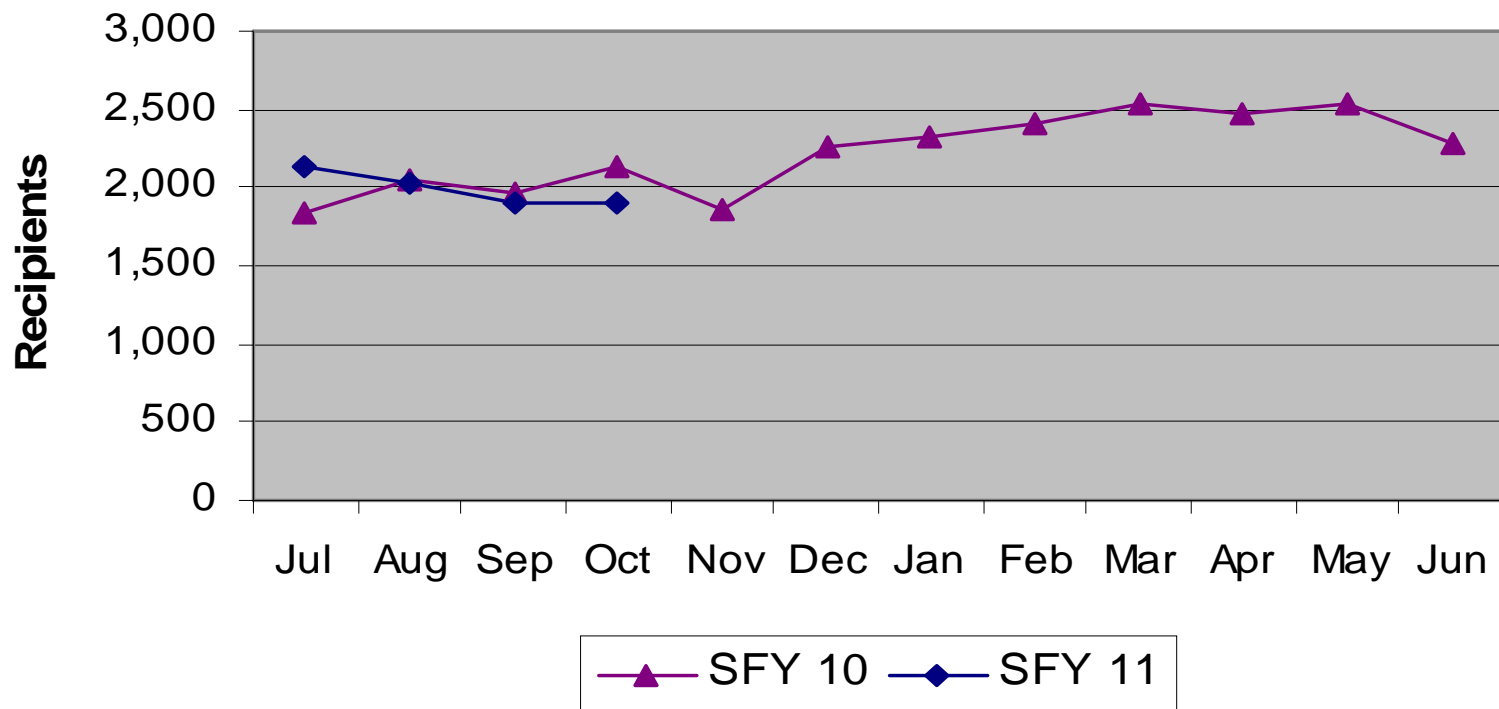
Day Treatment Expenditures

Child and Adolescent Day Treatment Expenditures



Day Treatment Recipients

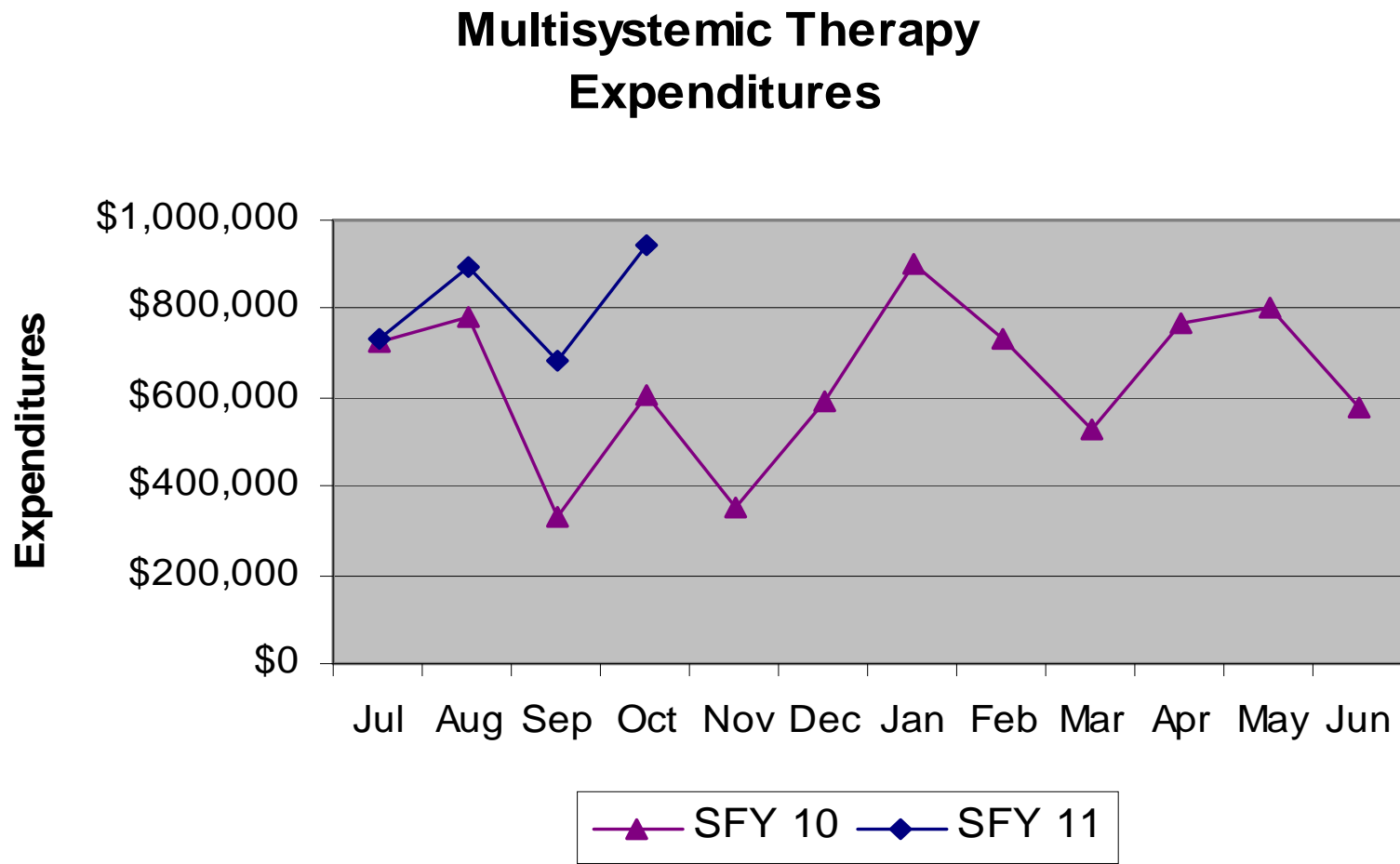
Child and Adolescent Day Treatment Recipients



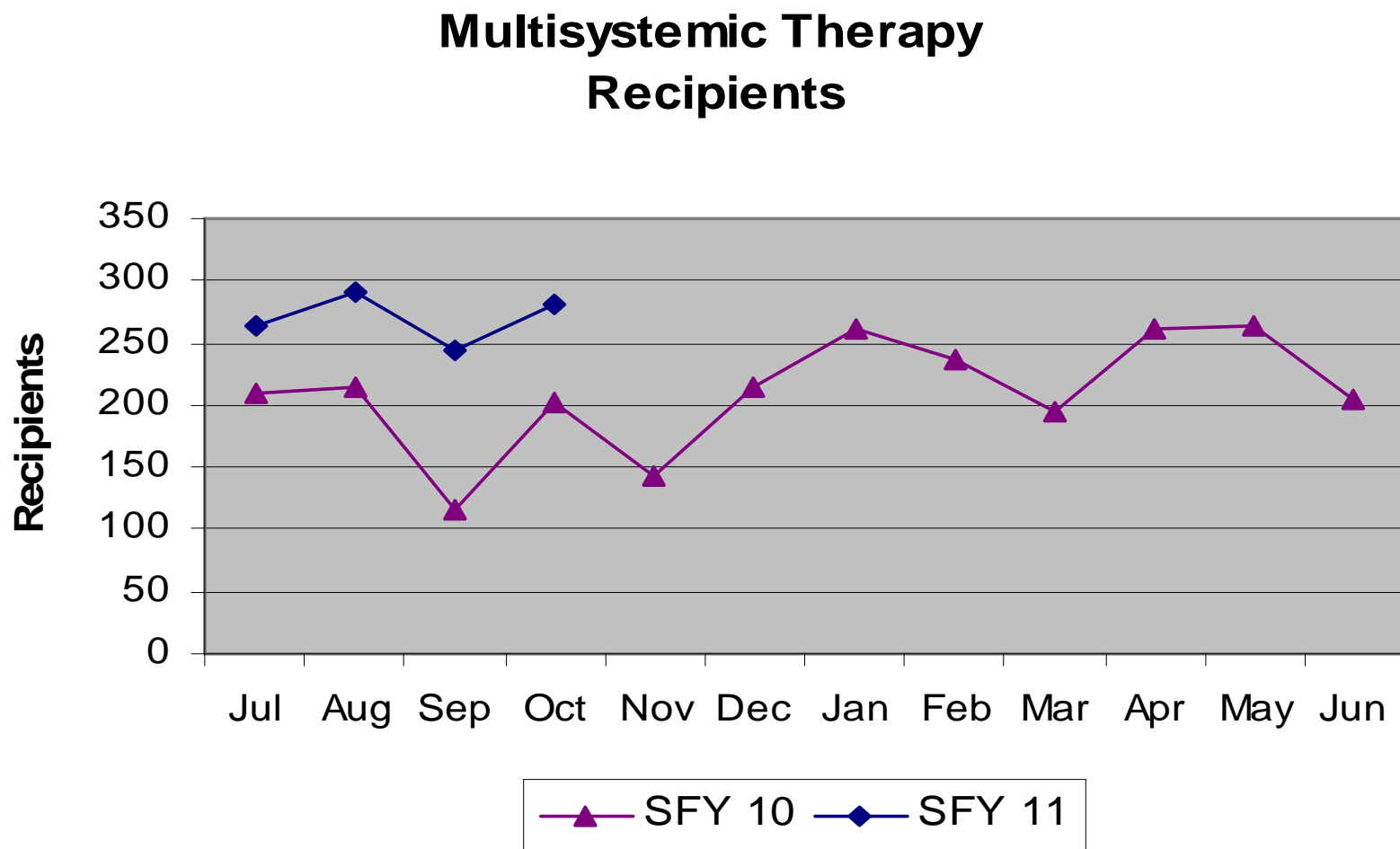
Day Treatment

- Expenditures are down 17.3%
 - = \$1 million/month (less)
- Less ~450 children/month
- Stricter policy criteria
 - updated eligibility guidelines
 - increased clinical staffing requirements

Multisystemic Therapy (MST) Expenditures



Multisystemic Therapy (MST) Recipients



Multisystemic Therapy (MST)

- Expenditures are up 13.7%
 - = \$98,000/month (more)
- 30 more children/month
- **Growth is +**
- Evidence-based practice with outcome metrics

Adult Services

Community Support

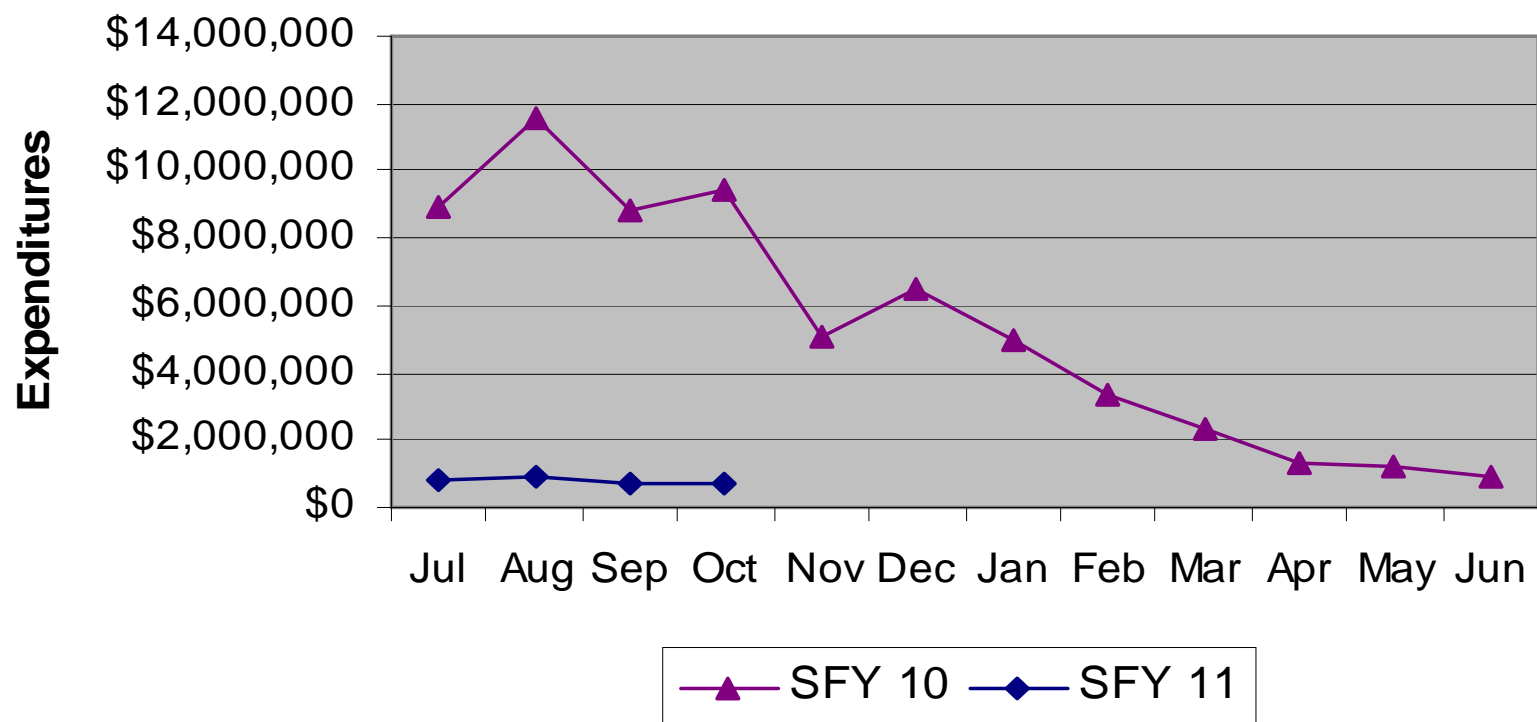
Community Support Team

Assertive Community Treatment Team
(ACTT)

Psychosocial Rehabilitation (PSR)

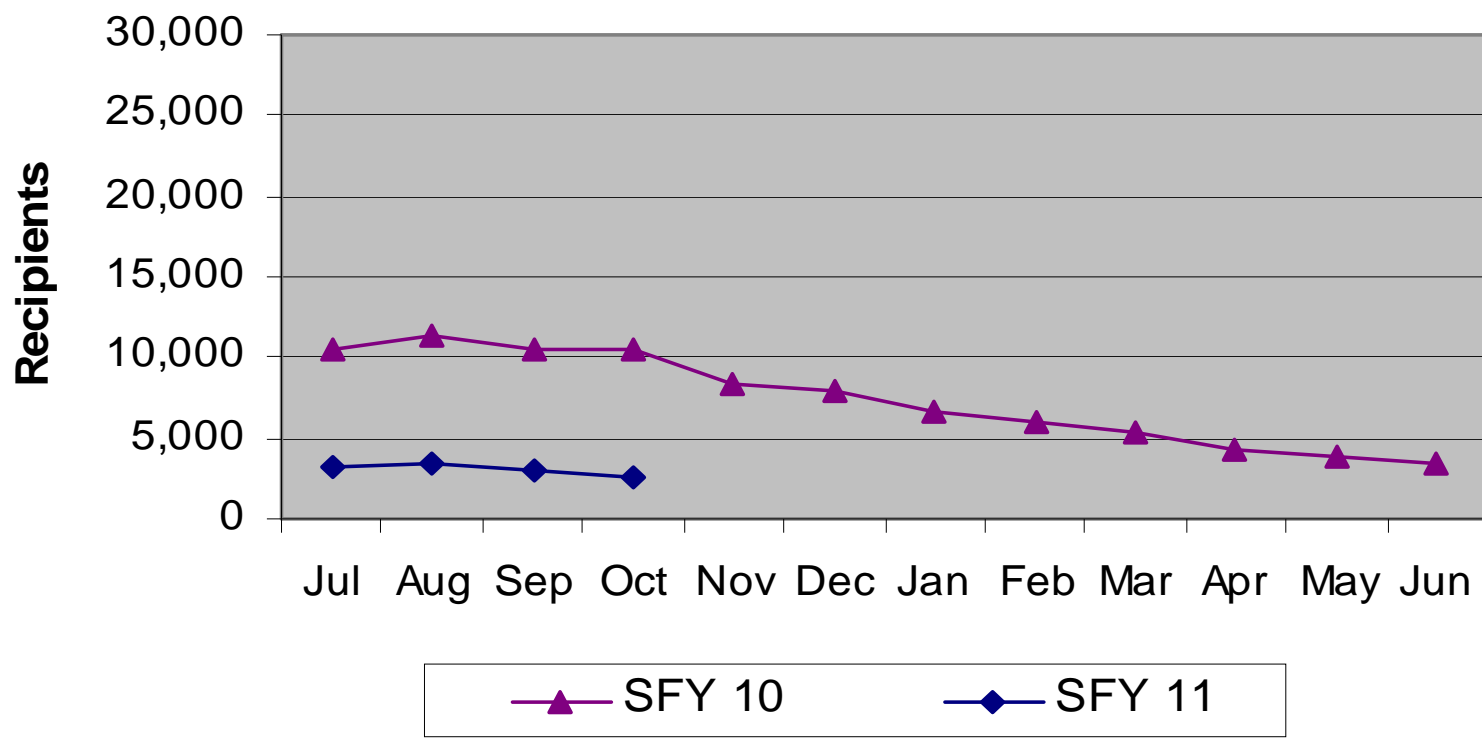
Community Support—Adult Expenditures

Community Support - Individual Adult Expenditures



Community Support-Adults Recipients

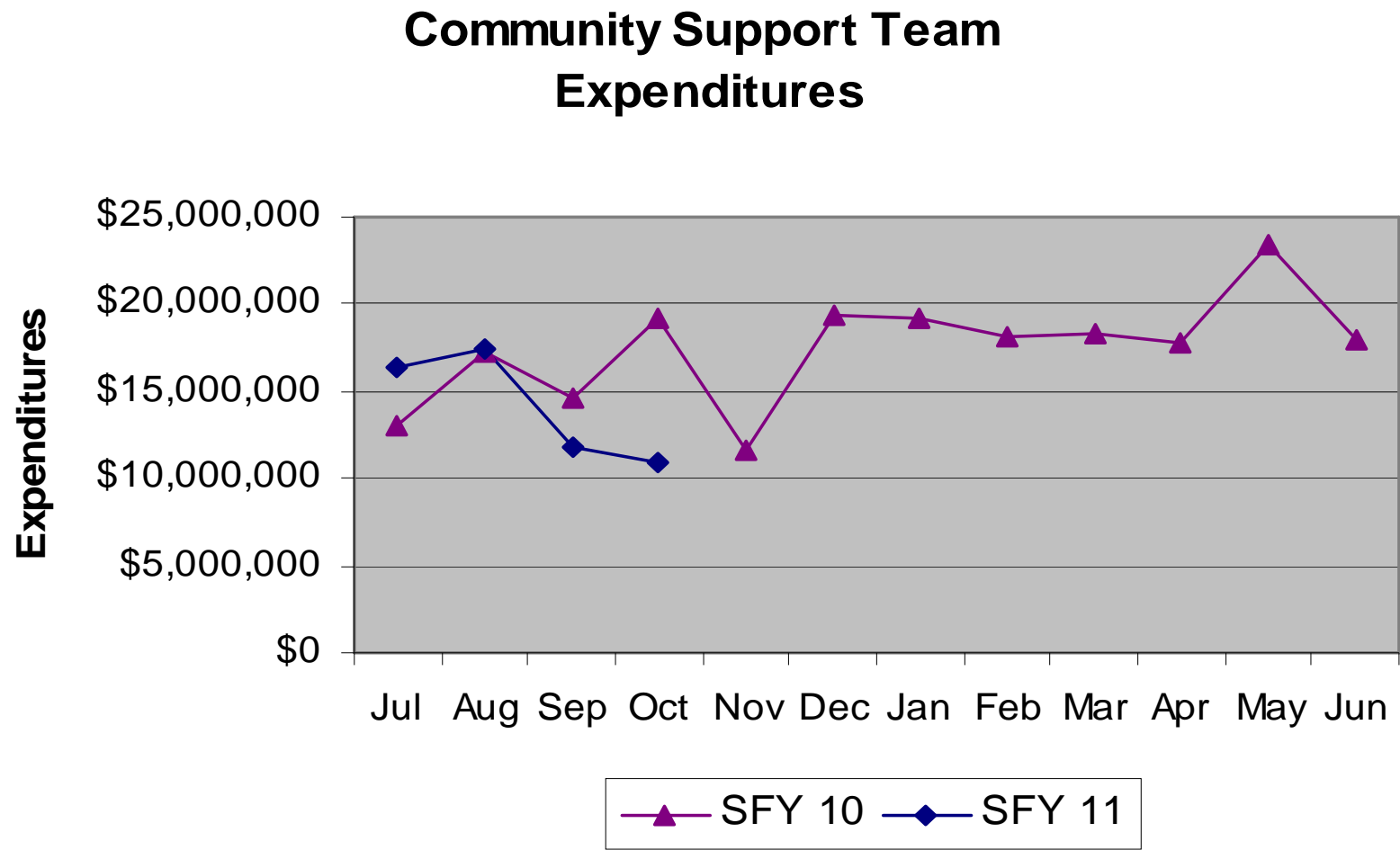
**Community Support - Individual Adult
Recipients**



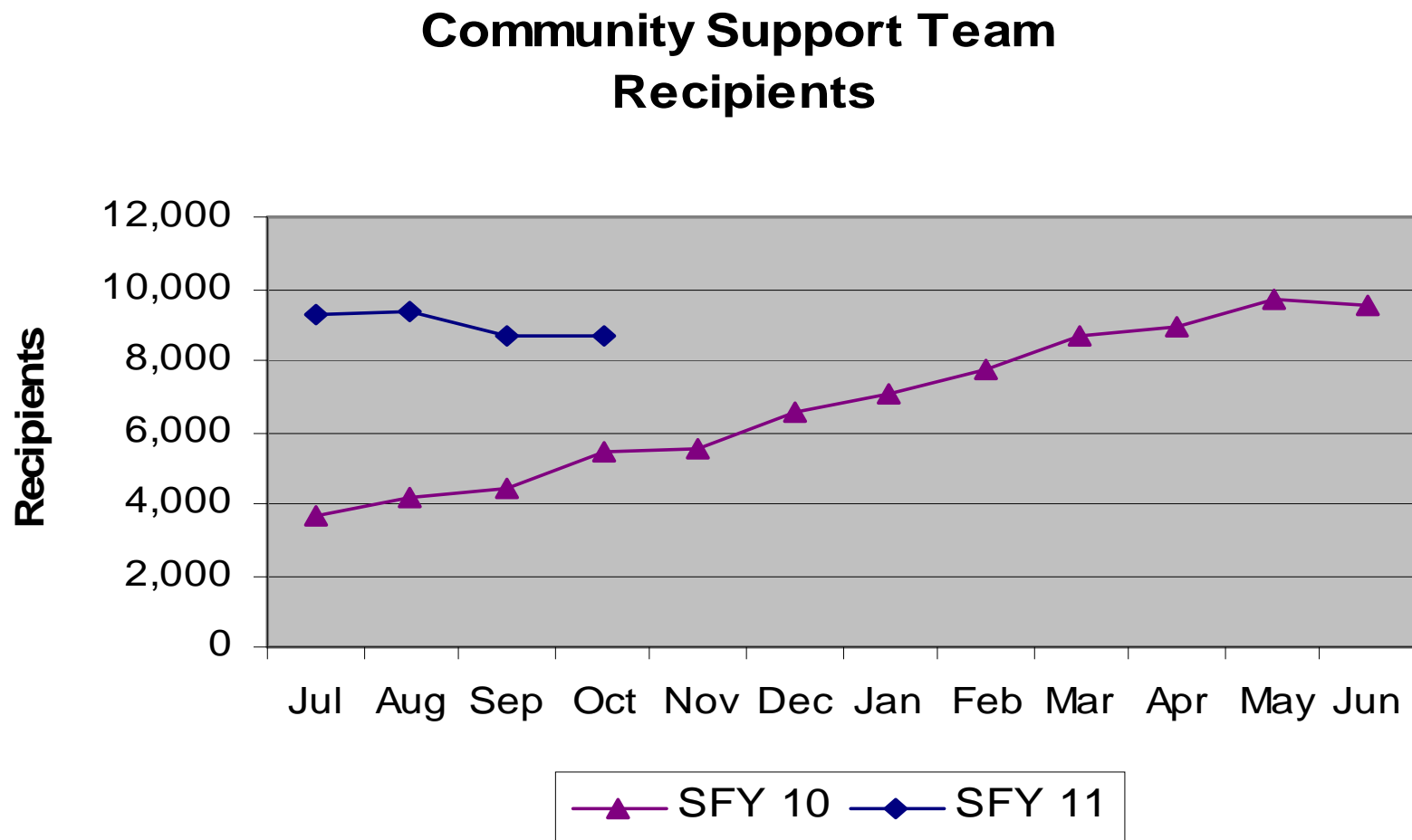
Community Support-Adults

- Expenditures are down 35%
 - = \$407,000/month (less)
- ~800 fewer adults per month
- ~ 2600 adults still receive this service
- Trend continues downward
- Service ends December 31, 2010

Community Support Team (CST) Expenditures



Community Support Team (CST) Recipients

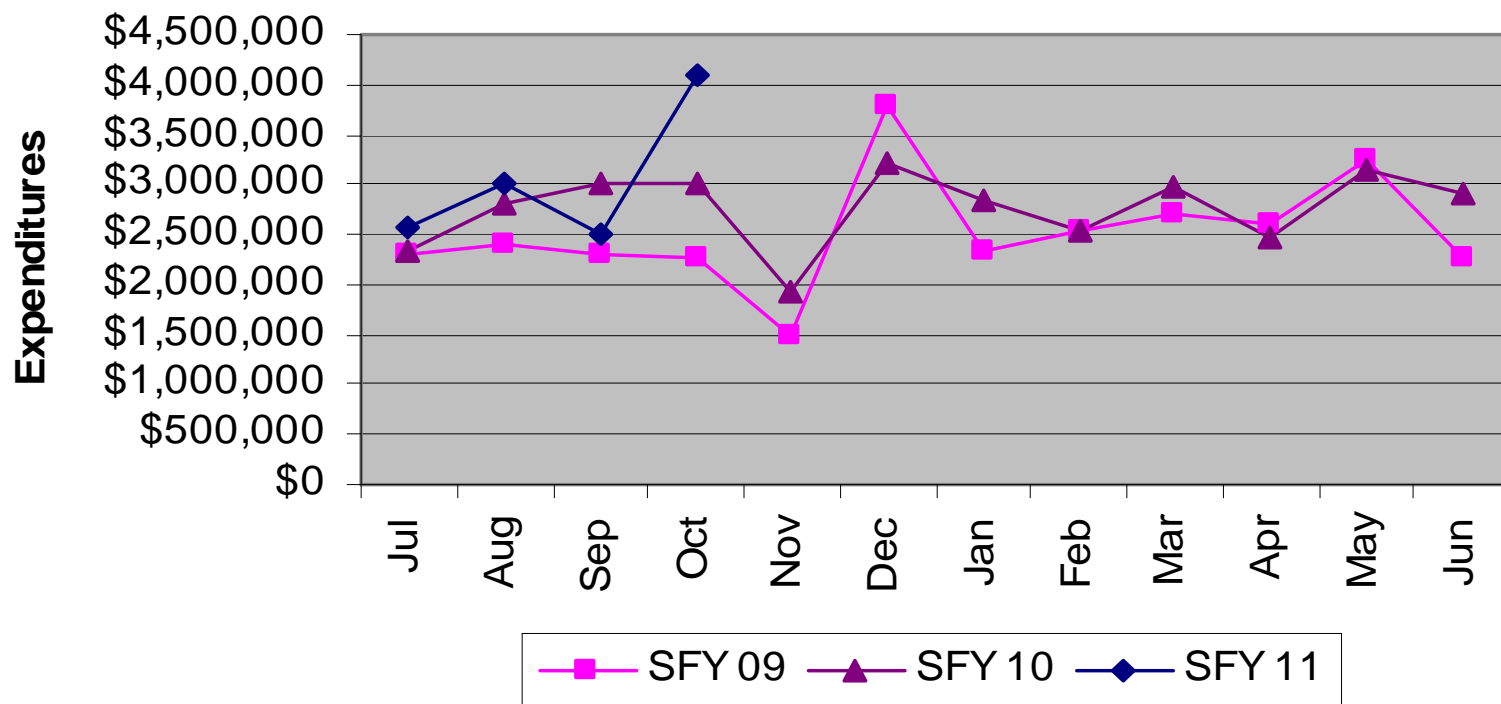


Community Support Team (CST)

- Expenditures are down 28%
 - = \$5.5 million/month (less)
- ~ 390 fewer adults per month
- Trend continues downward
- New policy changes included: more clinical staffing, decrease in unit limits/month, rate decrease

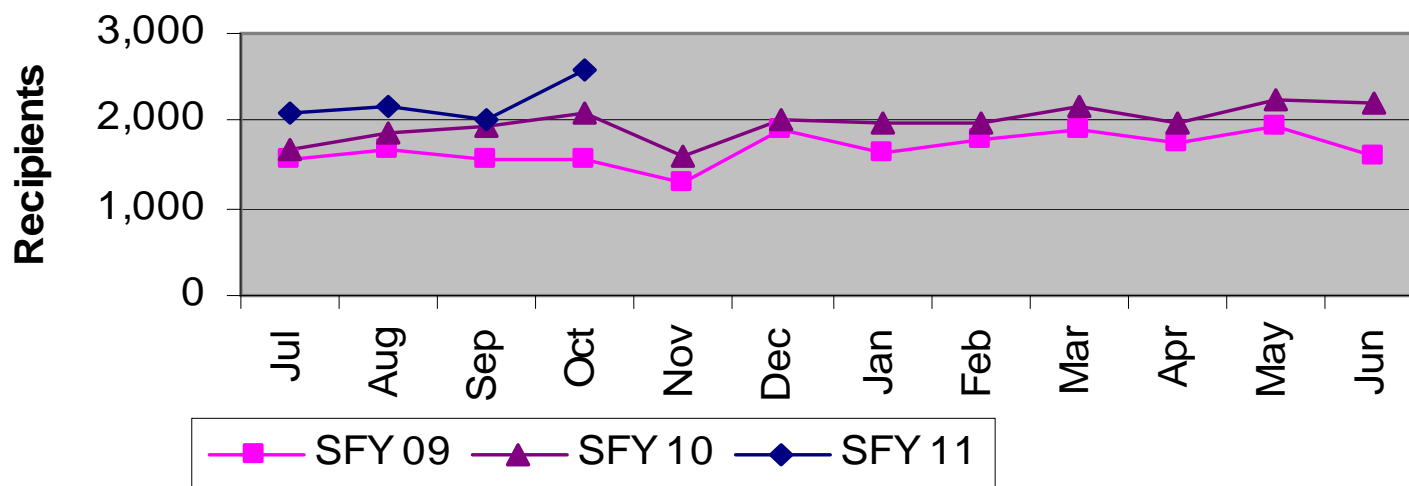
Assertive Community Treatment Team (ACTT) Expenditures

**Assertive Community Treatment Team
H0040**



Assertive Community Treatment Team (ACTT) Recipients

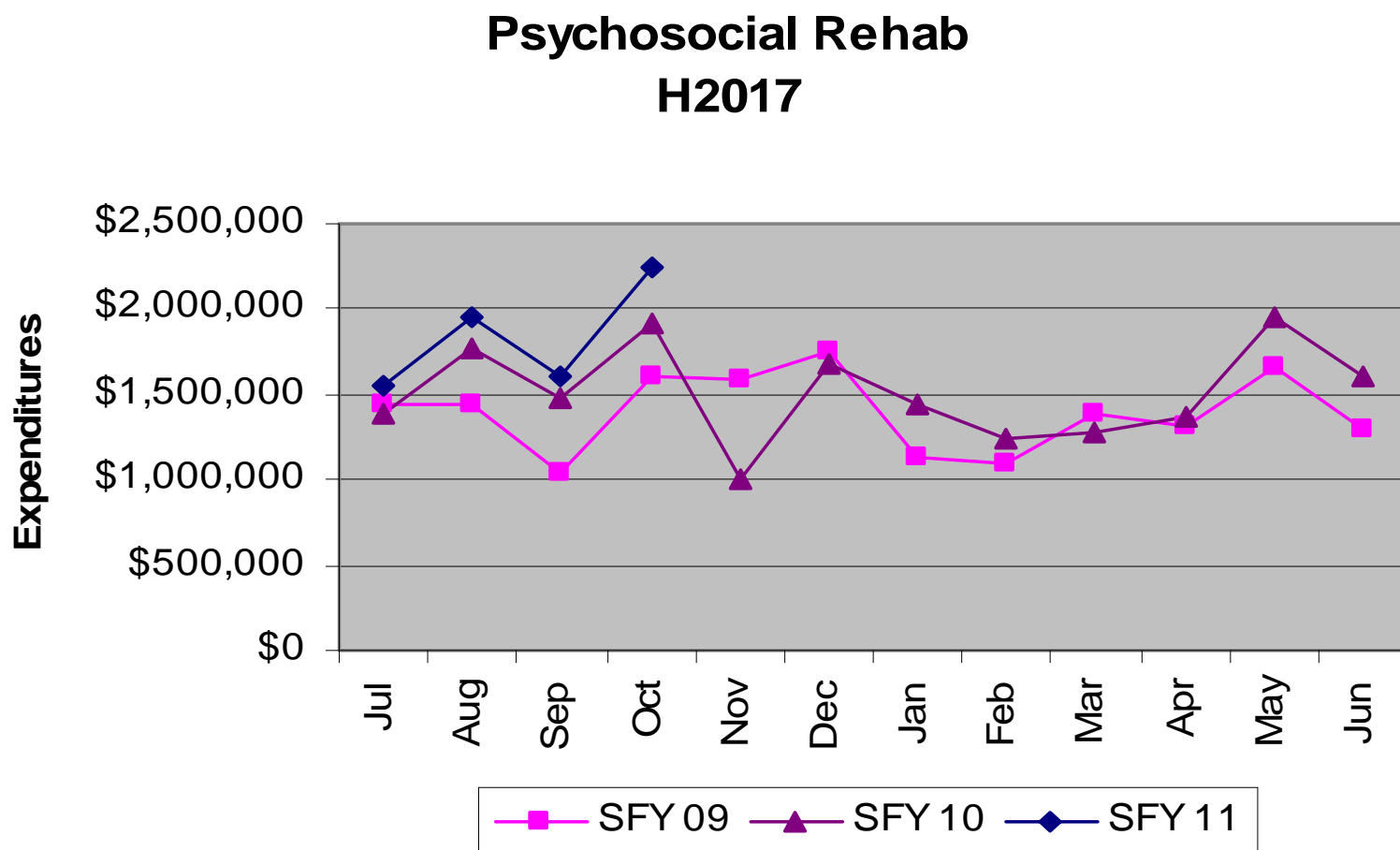
**Assertive Community Treatment Team
H0040**



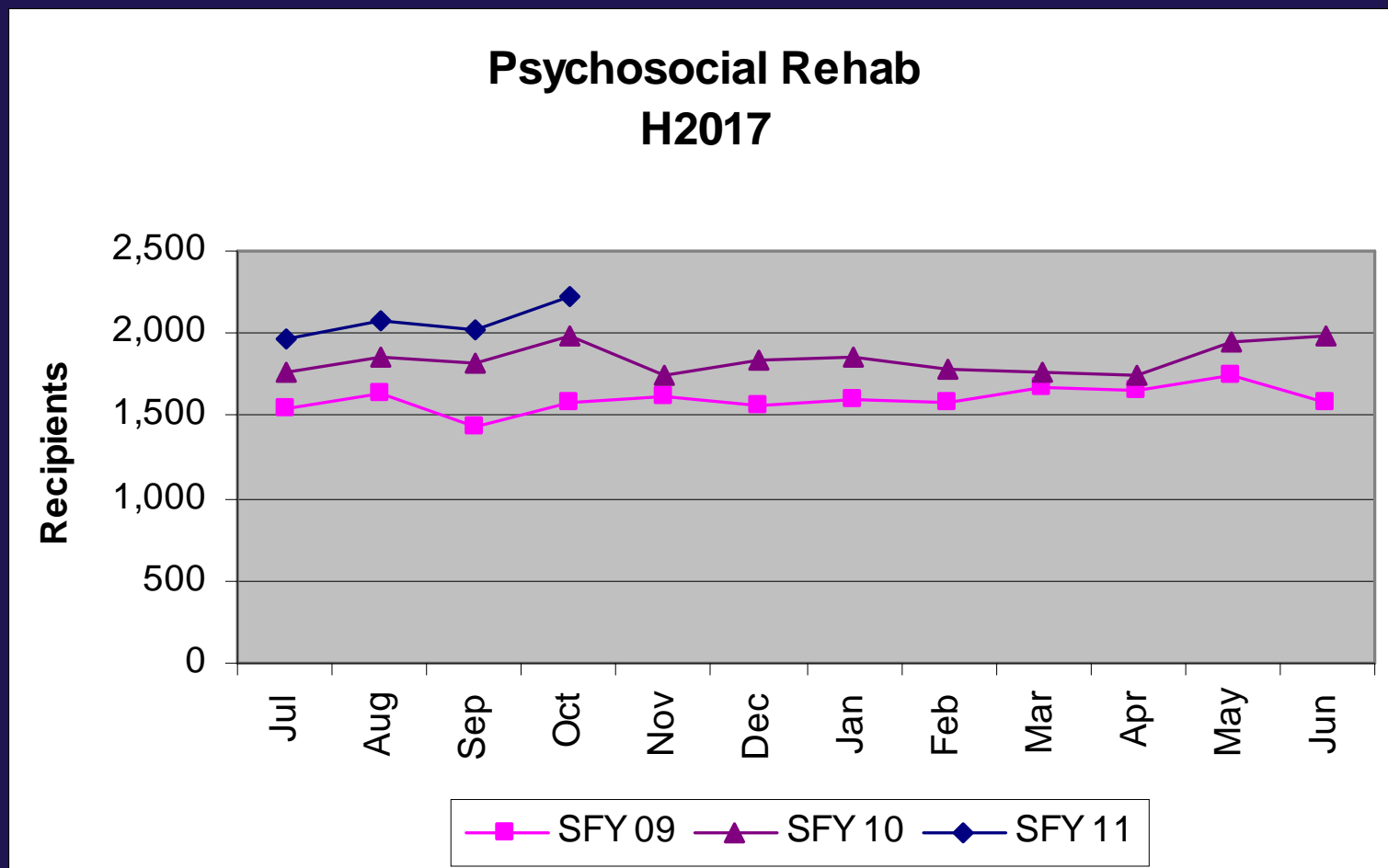
Assertive Community Treatment Team (ACTT)

- Expenditures have increased 7.4%
 - = \$211,000/month (more)
- ~ 60 more adults per month
- **+ Growth**
- Evidence-based service

Psychosocial Rehabilitation (PSR) Expenditures



Psychosocial Rehabilitation (PSR) Recipients



Psychosocial Rehabilitation (PSR)

- Expenditures have increased 11.3%
 - =\$187,000/month (more)
- ~200 more adults per month
- May be referrals from CS-Adult or CST
 - Clinically appropriate

Children & Adult Services

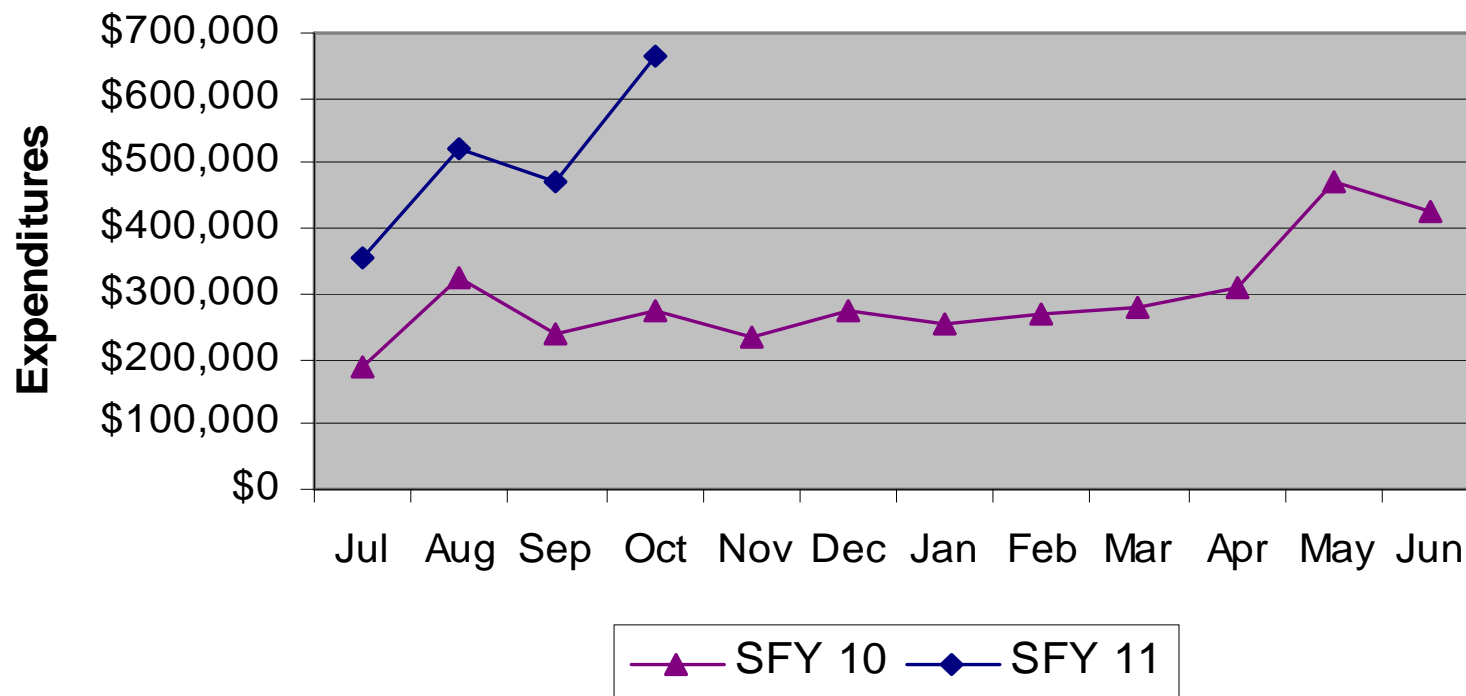
Substance Abuse Intensive Outpatient
(SAIOP)

Mobile Crisis

I/DD Targeted Case Management (CAP
waiver & non-waiver)

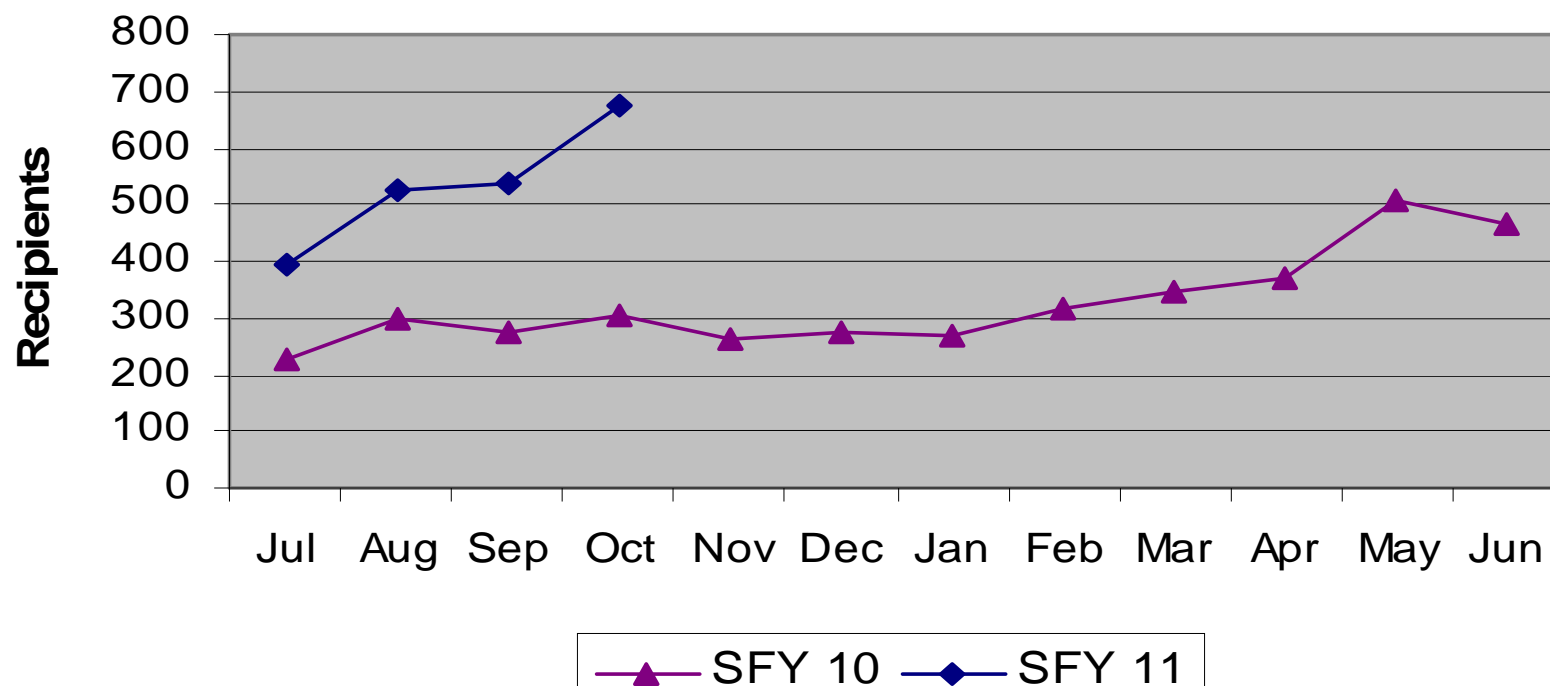
Substance Abuse Intensive Outpatient (SAIOP) Expenditures

Substance Abuse Intensive Outpt Program Expenditures



Substance Abuse Intensive Outpatient (SAIOP) Recipients

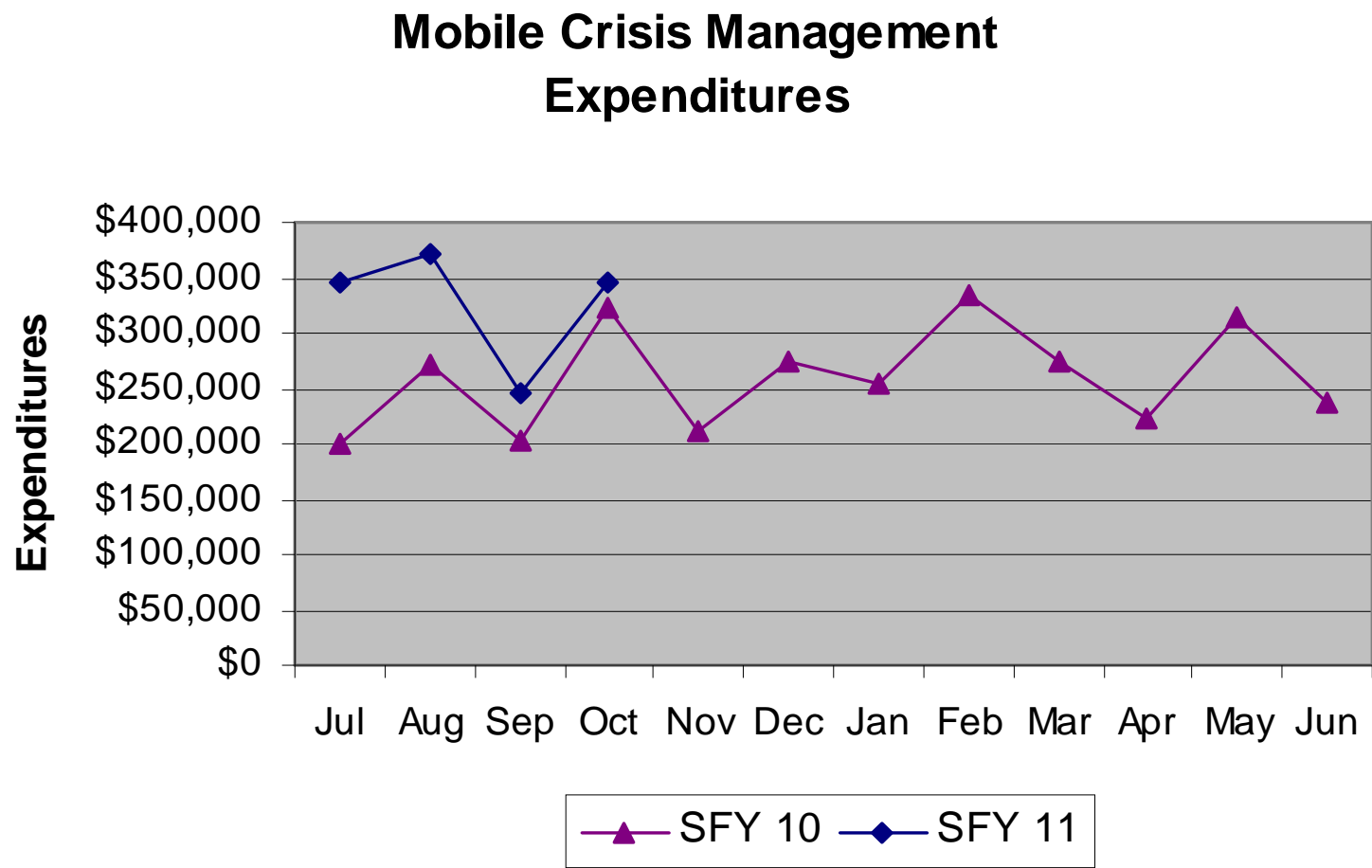
**Substance Abuse Intensive Outpt Program
Recipients**



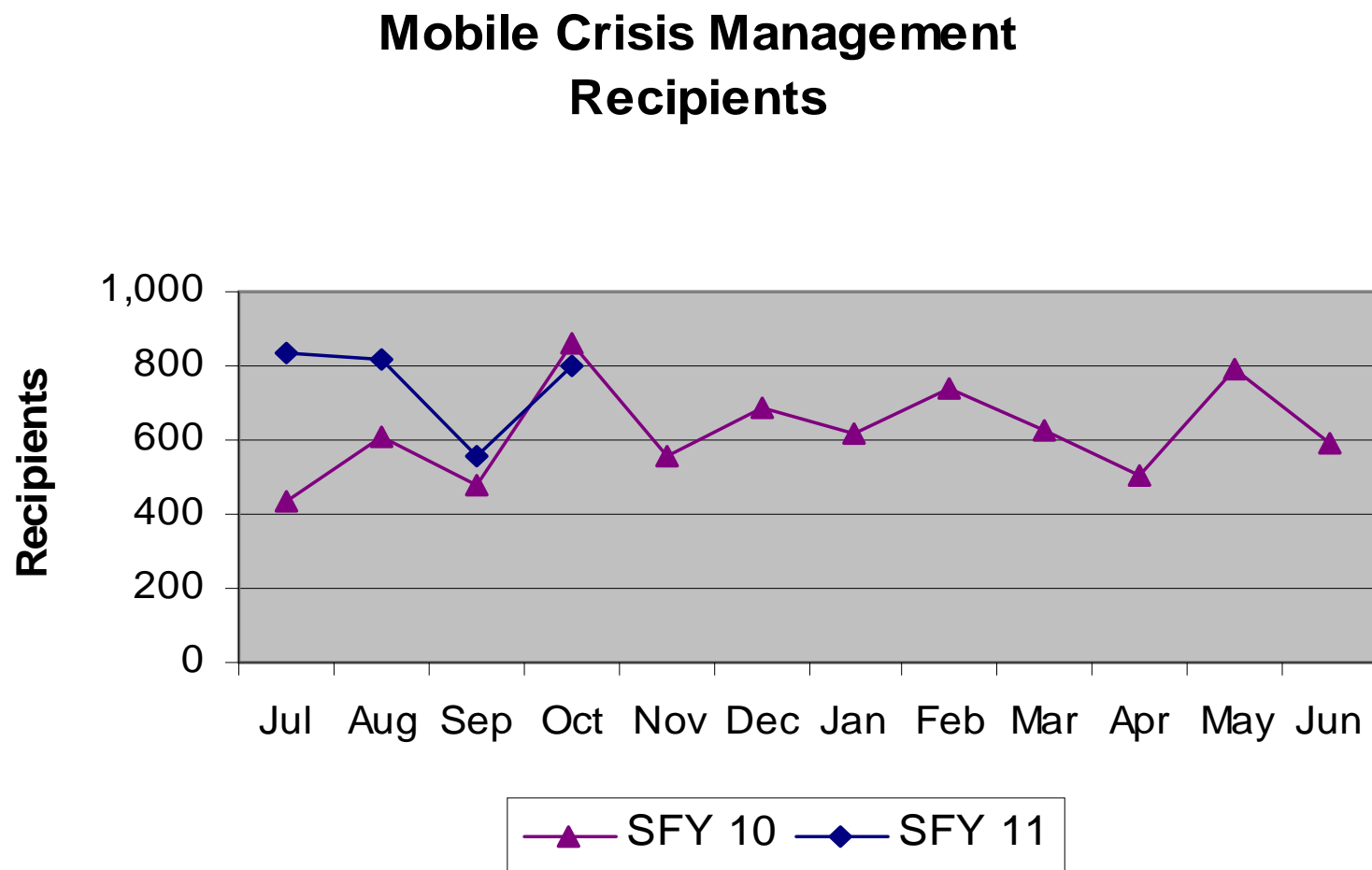
Substance Abuse Intensive Outpatient (SAIOP)

- Expenditures are up 25%
 - =\$100,000/month (more)
- ~90 more recipients per month
- + Growth
- New policy guidelines allowed for a 30-day pass-through before prior authorization is required

Mobile Crisis Management Expenditures



Mobile Crisis Management Recipients

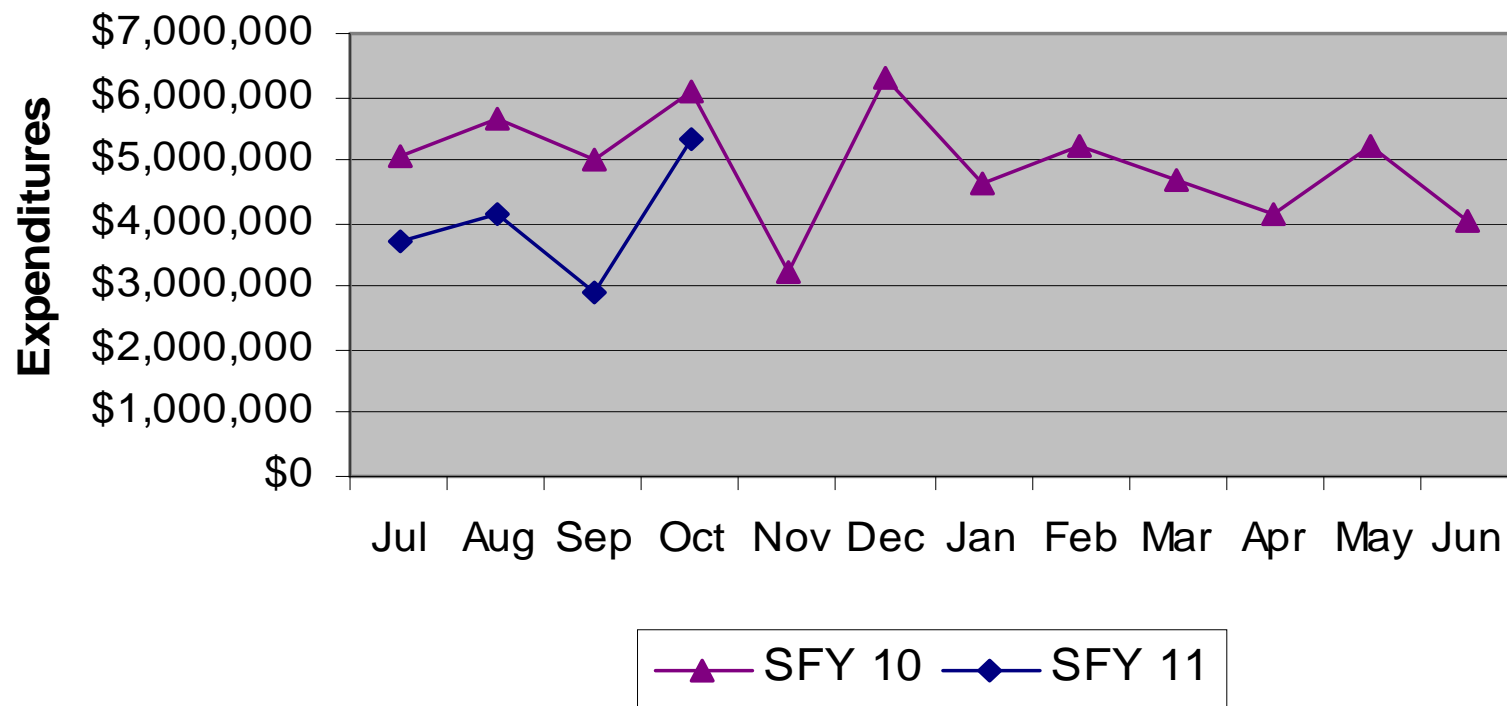


Mobile Crisis Management

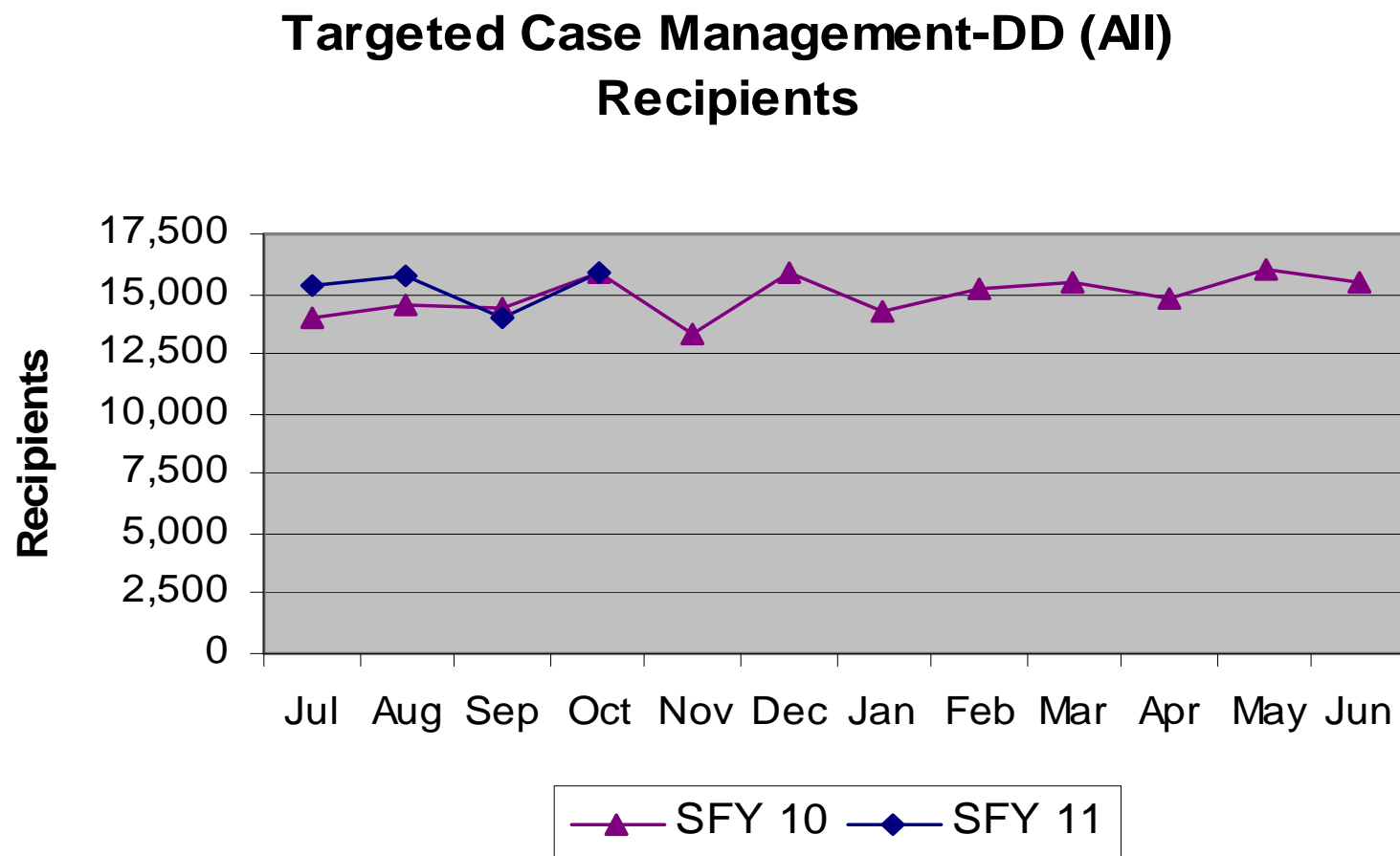
- Expenditures have increased 26%
 - =\$68,000/month (more)
- ~120 more recipients per month
- Should divert from emergency departments and inpatient

I/DD Targeted Case Management Expenditures (CAP & non-waiver)

**Targeted Case Management-DD (All)
Expenditures**



I/DD Targeted Case Management Recipients (CAP and non-waiver)



I/DD Targeted Case Management (CAP & non-waiver)

- Expenditures are down 19.3%
 - =\$334,000/month (less)
- CAP recipients (in case management) have increased 3%
 - ~150 more CAP recipients per month
- Non-waiver recipients (in case management) have decreased 7%
 - ~170 less recipients per month
- # of I/DD case management recipients is fairly static
 - Decreased expenditures likely to 3 unit/month limit
 - Limit phases-out with weekly case rate

Questions